

City of Richfield
Mechanical Permit Application

Office use only

Job Site Address: _____ Unit # _____ Tenant/Bldg Name _____

Project Valuation: \$_____ The Applicant Is: ☐ Owner and Occupant ☐ Contractor
TOTAL PROJECT VALUATION TO INCLUDE ALL MECHANICAL EQUIPMENT AND LABOR NECESSARY FOR JOB COMPLETION, WHETHER FURNISHED BY CONTRACTOR, OWNER OR OTHERS

Property Owner *Required*

Name _____
Address _____ Unit # _____
City _____ State _____ Zip _____
Phone () _____ Cell Phone () _____

Contractor/Applicant

Name _____
Address _____ E-Mail Address _____
City _____ State _____ Zip _____
Phone () _____ Cell Phone () _____ License # _____

Property Use	Type of Work
<input type="checkbox"/> Single Family Residential	<input type="checkbox"/> New Building
<input type="checkbox"/> Duplex*	<input type="checkbox"/> Basement Finish
<i>*(separate permit required for each unit)</i>	<input type="checkbox"/> Addition
<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Remodel/Alteration
<input type="checkbox"/> Commercial	<input type="checkbox"/> Furnace
<input type="checkbox"/> Institutional	<input type="checkbox"/> Air Conditioner
	<input type="checkbox"/> Furnace/Air Conditioner
	<input type="checkbox"/> Move Gas Meter to Exterior
	<input type="checkbox"/> Refrigeration
	<input type="checkbox"/> Gas Fireplace
	<input type="checkbox"/> Boiler

Mechanical Item(s) (indicate quantity for each)

___ Bath Fan	___ Range
___ Chimney/Flue	___ Rooftop Unit
___ Dryer	___ Space/ Unit Heater
___ Ductwork	___ Temporary Heating Unit
___ Piping – Gas	___ Ventilation
___ Piping – Steam/ Hot Water	___ Other _____

___ Please indicate number of
Inspections needed.

Specific Description of Work to be Completed

This permit may be issued only to a licensed mechanical contractor or to an owner who occupies the single-family dwelling. A duplex is not a single-family dwelling. (City Code 400.10)

I hereby apply for a mechanical permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Richfield and with the Minnesota Mechanical Code.

Applicant's Signature

Date

Mechanical Permit Fees	Conditions of Issuance
Mechanical Permit Fee: _____	(office use only)
Additional Inspection: _____	_____
State Surcharge: _____	_____
.0005 X valuation \$1,000,000.00 or less (Call the Inspections Department at 612-861-9860 for state surcharges on all permits valued \$1,000,000.00 or more).	_____
Investigation Fee: _____	Approved by: _____
	Date: _____
TOTAL FEES DUE: _____	

Required Inspections	Fees
<input type="checkbox"/> Final <input type="checkbox"/> No Insp. Req'd <input type="checkbox"/> Orsat <input type="checkbox"/> Gas Line Air Test <input type="checkbox"/> Rough-In Ductwork <input type="checkbox"/> Investigation <input type="checkbox"/> Questions at Site <input type="checkbox"/> Equipment Start-Up Test <input type="checkbox"/> Temp C/O <input type="checkbox"/> Routine	<p><u>RESIDENTIAL: ONE & TWO FAMILY DWELLINGS</u> 1.5% of jobcost Minimum of \$35.00 (Includes one inspection) <i>Each Additional Inspection: \$35.00</i></p> <p><u>COMMERCIAL, INDUSTRIAL, MULTI-FAMILY</u> 1.5% of jobcost Minimum of \$45.00 (Includes one inspection) <i>Each Additional Inspection: \$35.00</i></p> <p><u>SURCHARGE</u> - .0005 X Total Jobcost (1,000,000.00 or less)</p>



City of Richfield
 6700 Portland Avenue South
 Richfield, MN 55423
 (612) 861-9860
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